

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000541

FILED
Apr 12, 2012
Secretary of State

Entity Name: PALM COAST BUSINESS AND PROFESSIONAL NETWORK, INC.

Current Principal Place of Business:

7 OLD KINGS RD. N #8
PALM COAST, FL 32137

New Principal Place of Business:

17 OLD KINGS RD. N STE E
PALM COAST, FL 32137

Current Mailing Address:

17 N OLD KINGS ROAD
E
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3694362 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GIGLIO & SAROTE TAX ACCOUNTING & FINANCIAL
17 N OLD KINGS ROAD
E
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T
Name: BARNIER, STEVE CPA
Address: 17 N OLD KINGS ROAD, SUITE E
City-St-Zip: PALM COAST, FL 32137

Title: PP
Name: MAZUREK, IVONE
Address: 7 OLD KINGS RD. N #8
City-St-Zip: PALM COAST, FL 32137

Title: P
Name: MOLL, BRIAN
Address: 7 OLD KINGS RD. N #8
City-St-Zip: PALM COAST, FL 32137

Title: S
Name: VERSEK, DIANA
Address: 7 OLD KINGS RD. N #8
City-St-Zip: PALM COAST, FL 32137

Title: VB
Name: BAGDON, BOB
Address: 7 OLD KINGS RD. N #8
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVE BARNIER

T

04/12/2012

Electronic Signature of Signing Officer or Director

Date